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TRANSMITTAL FORM

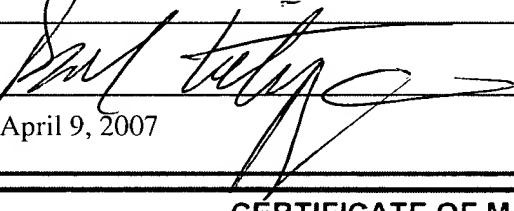
(to be used for all correspondence after initial filing)

	Application Number	09/854,142
	Filing Date	May 10, 2001
	First Named Inventor	Ilse Bartke
	Group Art Unit	1651
	Examiner Name	Susan M. Hanley
Total Number of Pages in This Submission		305J-900320US

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Issue Fee Transmittal	<input checked="" type="checkbox"/> Fee Address Indication Form	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input checked="" type="checkbox"/> Letter to Draftsperson	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Allowance	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Receipt Acknowledgement Postcard	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Authorization to Charge Deposit Account Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.		
Remarks		

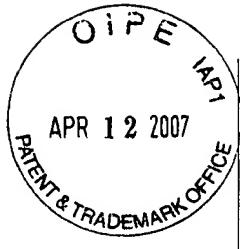
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Paul Littlepage, Reg. No. 48,581, Quine Intellectual Property Law Group, P.C.
Signature	
Date	April 9, 2007

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U. S. Postal Service as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below.

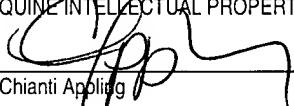
Typed or printed name	Chianti Appling		
Signature		Date	4/9/07



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QUINE INTELLECTUAL PROPERTY LAW GROUP, P.C.

By _____


Chianti Apling

Attorney Docket No. 305J-900320US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Ilse Bartke, et al.

Application No.: 09/854,142

Filed: May 10, 2001

For: NGF FOR THE PREVENTION OF
DEMYELINATION IN THE
NERVOUS SYSTEM

Examiner: Susan M. Hanley

Art Unit: 1651

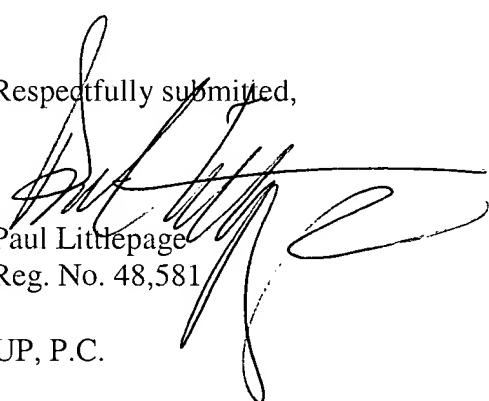
LETTER TO OFFICIAL DRAFTSPERSON

Attn: Draftsperson
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant hereby submits 9 sheets of formal drawings to be made of record in the above-identified case.

Respectfully submitted,


Paul Littlepage
Reg. No. 48,581

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